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Christianity Views Fetal Research

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It is no longer an easy matter for Christians to have unified solutions to moral problems created by medical science. Disunity is caused sometimes by the lack of data surrounding a new medical procedure, but most of the time disagreement comes from the vast resources of Christian revelation which offer numerous approaches to the solution of moral problems. In our present day, the science of theology is advancing rapidly, and is responsible for exposing a diversity of starting points or approaches to solving moral problems.

This article explores four different opinions in one specific area of Christian disunity — nontherapeutic (clinical) fetal research. (Nontherapeutic research is used to bring benefits to future generations and not directly to the volunteer.) In giving moral opinions about the use of fetuses in this type of research, Christians have offered more than four. But as a background for proposing another view, the four selected for analysis are sufficient. Professors Fletcher's and Ramsey's proposals must be considered first because they present opposing conclusions which set the polar limits of Christian disunity.

Prof. Joseph Fletcher, teacher of medical ethics at the University of Virginia School of Medicine, maintains that any legitimate research on a fetus to be aborted is justified because it has no rights and belongs to no one.¹ Prof. Paul Ramsey of Princeton University has charted a way exactly opposite. He claims that to make any nontherapeutic research just, consent must be obtained. He finds that no one can justly assume the role of proxy, and that the fetus is unable to give consent. Hence, fetal research is unjust.²

Lying somewhere in between these contraries are other answers. Richard A. McCormick, S.J., and Leroy Walters, both associated with Kennedy Institute for the Study of Human Reproduction and Bioethics at Georgetown University, veered toward center when they expressed their Catholic views in a recent article:

"In our opinion, nontherapeutic research that entails 'no discernible risk' or 'minimal risks' is morally permissible in the case of children. This view is based on the general notion that all members of a society owe certain minimal debts to that society, among them the duty to take part in relatively safe biomedical research projects . . . this position can without difficulty be applied to fetuses whose parents intend to bear responsibility for the case of children-to-be-born."

Here, both are talking about fetuses which are to be born. But to give guidance to those who believe in a mother's right to have an abortion, they offer this principle to protect the fetus to-be-aborted during research:

"In cases involving abortion . . . only research procedures which would be permitted by future parents should be allowed."³

Recently another "in-between" opinion, which is not Christian in origin, but which some Christians adopt appeared in the *Federal Register*.⁴ It is very similar to the one above in content, but it is bound to have a much greater impact on future fetal research. It was drawn up by "The National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research," which submitted a number of recommendations and guidelines to Caspar W. Weinberger, former secretary of the Department of Health, Education, and Welfare.⁵ He appointed this commission last year to study the public policies concerning research on fetuses, pregnant women, and *in vitro* fertilization. The Commission's draft indicated which fetal research projects were acceptable and which were not. The Secretary accepted the draft July 29, 1975, and made most of it regulatory for all DHEW grants, August 8, 1975.

Surprise After Shock

It is a pleasant surprise to read them. After the terrible shock we received when the Supreme Court informed us, January 22, 1973, that our forefathers who wrote the Constitution and the Bill of Rights gave no rights to non-viable fetuses, it is surprising to see a government body show some concern for them. It is also pleasant — like breathing fresh air after working all day in urban smog — to see the sensitivity with which fetal life is protected.

In the formation of the majority of regulations, the Commission used four humane principles which did much to retain the traditional dignity of incipient life: 1) no research should expose the fetus to any risks of life or health unless they are minimal; 2) the fetus should not be deprived of the right to give consent, which can be done by proxy through the mother; 3) it is prohibitive to do fetal experimentation if the knowledge can be obtained other ways, such as through "investigation on pertinent animal models and non-pregnant humans (when appropriate);" and 4) all fetuses are to be treated equally without discrimination. From these principles, a number of recommendations were formed which gave status and protection to the fetus.

For instance, in their concern for fetal human life no money for research would be granted unless the form, to which the mother must consent, had proper monitoring and the project passed the scrutiny of a review board. Also, when the Commission considered "nontherapeutic research directed toward the fetus during the abortion pro-

cedure and nontherapeutic research directed towards the non-viable fetus *ex utero*," it required that the fetus must have gestated less than 20 weeks, and nothing must be done which would alter the duration of the life of the fetus.

So far, four different views have been presented: Fletcher's, Ramsey's, the Commission's, and McCormick's and Walter's. If anyone is interested in studying a fuller spectrum of Christian opinions, he may wish to examine the summary reports which the Commission noted in its minutes during a period when it invited thirty-five witnesses to testify — philosophers, theologians, social workers, physicians, organization spokesmen, lawyers, public officials, and students, (many of them speaking from a Christian background).⁶ The majority agreed substantially with at least one of the four opinions already discussed, but they did have a number of minor differences. The minutes indicate that the Commission depended a great deal upon these testimonies in the final draft of their recommendations.⁷

In the process of approaching a unified Christian stand on what is right and what is wrong in clinical fetal research, many divergent views must be eliminated by showing that even though they may be Christian in some aspects, they are not representative of Christian teaching in all aspects. To some extent the four opinions explained above can be eliminated because each one has omitted some part of Christian revelation. This last statement will be clarified in the following comments about each one's argument.

Many Christian philosophers and theologians accept Fletcher's observation that what characterizes a "person" is his awareness of social and legal rights and responsibilities. They part company with him, however, when he insists that rights are consequential to this awareness. Fletcher believes that personhood comes into existence some years after birth and can depart long before a person dies; only during this time do rights exist. To put it another way, only when the human being can respond in a meaningful way is he a person; thus, fetuses, young children, the senile, and those in irreversible coma have no rights. That such human beings have a vital source within them which is the origin of rights seems to have no reality for the Professor, but it does for Christians who believe from revelation that God creates something which makes the human being a person and dignifies him with rights.

Necessary Digression

A slight digression is necessary to clarify the distinction now being made between "person" and "human being." Not so long ago everybody agreed that any human being was a person. For Christians, the theological definition of "human being" applied equally to "person." Many Christians still use the terms interchangeably, and are surprised

to see others making distinctions. Today, "human being" is often used as a scientific term to identify something that comes from human parents, with the same chromosomal makeup and genetic code, whose embryonic development, anatomic structure, and physiological functions are similar to a being classified as *homo sapiens*. "Person" is reserved to identify a human being who has rights. This distinction became more widely used sometime after the Supreme Court declared that a fetus had no constitutional rights until it was viable.

Back again to Fletcher's view. It must be admitted that he is no different from many other Christians in declaring a time when a human being becomes a person. Proponents can be found for almost every stage of the development continuum — conceptus, blastocyst, embryo, fetus, neonate, infant, child, and teenager. To arrive at a "time" theory, Fletcher and these proponents set down a criterion for the emergence of personhood from sciences such as embryology, psychology, anatomy, sociology, etc.

The question is asked: Which science offers the most accurate starting point for personhood? No one can answer it, and thus none of the theories are any help in giving guidance in a practical situation where one has to decide the moral issue: Are any rights being violated in this proposed project of fetal research? Since none of the theories is certain, there is only one way for a Christian to decide — take the safe course by acting on the presumption that the *conceptus* has rights. If judgments are made with respect for the presumed personal rights of the conceptus, then no rights will be violated. To say, for example, that the fetus to be aborted is usable in research because it is not wanted and has no rights, is to take a risk that rights will be violated. This is Fletcher's stand. In no way can a Christian accept this position.

Next, Christians gladly accept the DHEW regulations and guidelines in as much as they are expressions of moral concern which the American people have in response to those pediatricians and embryologists who feel that no regulations should impede fetal research. But that does not necessarily mean that they accept them as their own personal moral views.

Those pediatricians and embryologists who advocate that no regulations restrict nontherapeutic fetal research claim that "The research is necessary to help future generations. We must be allowed to do it, unhampered, for the public good." In the light of this "great need" for society, the moral issues involved are forgotten. But a Christian cannot forget them; human life is present and human rights need to be considered.

The DHEW regulations defend human life, but the source of these restrictions comes from public policy, which is the *raison d'être* for laws and court judgments. Public policy, though it might help in guiding a Christian's conscience to do the right thing, is not the sole source, and sometimes no source at all. Each Christian should make up

his conscience according to revealed truths and philosophy. Maybe these regulations express moral judgments that Christians accept, but there is no built-in guarantee that they will because the source from whence they came is not Christian.

McCormick and Walters arrive at a solution for the use of fetuses in clinical research in a typically Christian way, but in doing so they seem to ignore certain aspects of Christian revelation. This can be seen in two of their principles: 1) "All members of a society owe certain minimal debts to that society, among them the duty to take part in relatively safe biomedical research projects" — from this they concluded that parents, willing to take the responsibility, can consent to have their children-to-be-born be subjects in fetal research as long as the risks are minimal or non-discernible; 2) the other principle concerns fetal research which involves abortion cases: "Only procedures which would be permitted by future parents should be allowed."

Impracticality of Principles

The impracticality of these two principles has been pointed out by Ramsey,⁸ who claimed that in order to apply the first principle, two questions have to be answered, but neither one can be: What is an acceptable definition of "minimal risks?" and, who is the qualified judge to declare that a risk is minimal?

Their second principle might need some word revision because it seems to sanction unjust abortions. Mothers who are about to have abortions and are asked to consent to fetal testing are advised to follow the example of "future parents" who permit their fetuses to be used in clinical research. Now it is possible that "procedures which would be permitted by future parents" could be unjust. It is certain that McCormick and Walters do not support this possibility.

But no matter how it is worded, it will not be applicable at certain times for mothers about to have an abortion. Think of the research projects which are designed only for fetuses about-to-be aborted. Here no model exists to give guidance. Some other principle is necessary to help these mothers protect their fetuses.

Granted that the practical problems could be solved, there remain a couple of knotty questions for Christians: What is the nature of this duty which a fetus has, that is, is it a duty in justice or charity? Where in philosophy or theology do McCormick and Walters find this duty expressed?

There is real doubt that McCormick and Walters relied upon any personally acceptable philosophy to establish that a fetus has a duty in justice to participate in research. Two systems, natural law philosophy and Kantian deontology, have presented the most favorable theories to establish this kind of duty, yet it does not seem to be found in either of them.

Natural law philosophy makes man responsible because of the law of his very nature, but it does not demand that any duty be discharged until it is clearly known. Since the fetus can never know the existence of this duty, natural law philosophy positively states that the fetus is not bound in justice to discharge it.

Kantian deontology, which defends duty for its own sake, maintains that duty is recognized as duty only by a person who is able to perceive moral situations; duty cannot exist in a non-reasoning human being. It must be said that fetal obligations never could become a part of Kantian philosophy.

There are other philosophical theories that they could use to demonstrate fetal duty, but all of them have the fatal flaw that their arguments contain non-Christian aspects. For instance, utilitarianism which says that man achieves his goal when his actions give the most happiness to the most people, does approve of certain types of fetal research. The flaw shows in the altruistic goals set up by John Stuart Mill and G. E. Moore, two proponents of this philosophy. In this system, man's goal for existing is ultimately reduced to a means — he serves the common good. This means that fetuses should be used in research when they can further the common good. McCormick and Walters would reject this philosophy for Christian reasons. Christ taught that man's final goal is not in this life. He does not exist for the state or for the common good. His goal is self-perfection which is achieved in part by charitable actions toward his fellow men and comes to fulfillment in the next life.

Let it be granted that McCormick and Walters did not use philosophy as their source for claiming fetal duty in justice. This can be done with some bravado because there are still other avenues to examine. Did they find fetal duty "in justice" expressed in revelation? A brief answer that might have to face a barrage of objections can be given: God's revealed truth does not condemn fetal research, but one looks in vain for any direct or indirect statement indicating any type of fetal obligation.

It seems clear that McCormick and Walters could not look upon this fetal duty as an obligation in justice. There is no foundation for such a judgment. But there are heavy indications that within the Christian law of charity they have found it. If this is true, then they would claim that a fetus is bound by charity to partake in noteworthy research projects when the data sought can only be supplied by fetal testing.

Duty's Existence Denied

Upon closer examination it seems that the existence of such a duty must be denied even though the fetus undergoes no discernible risk. Medical research has not advanced enough for anyone to claim with certainty that this or that research project will produce benefits for

future generations or to prove that the benefits are truly noteworthy. When duties are doubtful, they do not exist.

It must be concluded that the fetus has no obligation in justice or in charity to partake in clinical fetal research. However, it has been suggested that the fetus could be presumed to volunteer. Such a suggestion, if acted upon, would really dehumanize the fetus. The Christian volunteer receives nobility and merit because he intends to help his fellowmen out of a motive of charity based upon supernatural faith. No merit can come to the fetus, and it is robbed of any nobility — its participation is without love and faith.

Finally, Ramsey's conclusion, the fourth and last to be examined, comes closest to a true moral decision for a Christian. Bluntly stated, he believes no clinical fetal research is justified, because no person can rightfully and responsibly give proxy consent. But maybe he goes too far in rejecting, for all time, any nontherapeutic fetal research. The Christian's view is not that closed. There may be some room, but at the present time it is hard to see what sort of project might rightfully open the door.

The Christian describes a "human being" as one created by God over whom he has a special providence that will enable him to bring God's goodness and love to many in his lifetime and to receive God's gifts through others. This creature, made to God's own likeness, is destined to become a son of God and inherit heaven. Christians believe that there is nothing God wants more highly respected in the universe than man.

For instance, what mother who looks upon her unborn child as the supreme creation of God can easily give proxy consent for fetal nontherapeutic experimentation? Most of them would consider the use of their children for the gathering of scientific data repulsive. Benefits for future generations are so vague and the possibility that they will come, so unsure, that mothers cannot be psychologically persuaded by any sense of obligation to give proxy consent, and no one should expect this type of mother to give it.

Also, what Christian bio-researcher believing that his work takes on greatness when it is directed to helping God's favorite creatures, will find it easy to assure himself that nontherapeutic fetal research is nobler than the traditional respect paid to fetal life? His instincts warn him that such research treads on sacred waters, and the outcome could be sacrilegious.

Again, what Christian member of an ethics board who believes in the God-given dignity of human life will look upon any proposal for nontherapeutic fetal research as totally acceptable? For him, fetal research has not developed enough prestige to allow him to decide that even the best proposal has more merit than the good achieved by maintaining the traditional high respect for human life.

Notice, in each one of these cases there is a reluctance to approve

any nontherapeutic fetal research. However, none of them closes the door completely. What is happening is a weighing out of values — the good that comes from respecting human life in contrast to the benefits to humanity coming from fetal research. It is possible that benefits to future generations will become a greater Christian value, but today Christian judgment says, "So far it has not happened." If this is the direction Christian morality could eventually take, then Ramsey's absolute prohibition of fetal research cannot be called Christian.

A summary of the points made in this Christian view is: 1) personal rights are inviolable — they come from within, as opposed to being acquired; 2) the fetus must be presumed to possess personal rights any time the question of its use in clinical research is being decided; 3) Christians may use public policy to make moral judgments, but never exclusively; they always turn to reason and revelation to help them form their consciences; 4) fetuses do not have a duty in justice or charity to partake in clinical research; to presume they can volunteer would be to acknowledge they can be used as means to an end; 5) Christians should not close the door on the possibility of fetal research.

This analysis has come to an end, but dialogue about the morality of nontherapeutic fetal research has not. The position expressed here touches basic Christian thought, but it is not meant to be the final word. More study on everybody's part must continue in order to bring Christian unity out of revelation. At present, the Christian way to benefit future generations will come from intensified *therapeutic* research, where the living fetus and future fetuses still receive supreme consideration among God's creatures.

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3. McCormick, Richard A., S.J. and Walters, Leroy, "Fetal Research and Public Policy," *America*, June 21, 1975, Vol. 132, No. 24, p. 475.
4. *Federal Register*, "Protection of Human Subjects: Fetuses, Pregnant Women, and In Vitro Fertilization," Part III, August 8, 1975, Vol. 40, No. 154, pp. 33526-52.
5. The history of this commission began July 12, 1974, when Congress passed Public Law 93-348 which banned the financing of any fetal and infant research until the Secretary issued regulations and guidelines. The law specified that a commission be appointed by the Secretary to study the public policies involved in the use of fetuses in research and to submit recommendations to the Secretary. The Commission met for the first time in December, 1974. There were eleven members:

Kenneth John Ryan, M.D., Chairman, Chief of Staff, Boston Hospital for Women.
Joseph V. Brady, Ph.D., Professor of Behavioral Biology, Johns Hopkins University.
Robert E. Cooke, M.D., Vice Chancellor for Health Services, University of Wisconsin.

Dorothy I. Height, President, National Council of Negro Women, Inc.

Albert R. Jonsen, S.J., Ph.D., Adjunct Associate Professor of Bioethics, University of California at San Francisco.

Patricia King, J.D., Professor of Law, Georgetown University Law Center.

Karen A. Lebacqz, Ph.D., Assistant Professor of Christian Ethics, Pacific School of Religion.

David W. Louisell, J.D., Professor of Law, University of California at Berkeley.

Donald W. Seldin, M.D., Professor and Chairman, Department of Internal Medicine, University of Texas at Dallas.

Eliot Stellar, Ph.D., Provost of the University and Professor of Physiological Psychology, University of Pennsylvania.

Robert H. Turtle, LL.B., Attorney, VomBaur, Coburn, Simons & Turtle, Washington, D.C.

6. *Federal Register*, *ibid.*, pp. 33537-42.

7. *Ibid.*, p. 33540.

8. Ramsey, *op. cit.*, pp. 94-95.

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